File with: lowa Ethics and Campaign Disclosure Board



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510 E. 12 th , Ste. 1A Des Molnes, lowe 50319 Fax: 515-281-4073		s, see back of form SUMMARY PAGE		4A OS JUL 2008	1 9: 2	
	e same as on Statement of Organ	· \		ORM	· · · · · · · · · · · · · · · · · · ·	
Harrison (o Republica	en Women	1 1	DR-2 DISCLOS	IIDE	
(1)Statewide/Legislative/Judge (4)County Central Committee (5)	of committee you are reporting for. Standing for Retention Candidate (2) 5) County Candidate (6) City Candidate (7) City Candidate (10) School Bo	te (7) School Spard or Other Po	(Re	Office Use Orlly	•	
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable	e) Log Sca	ged in MANA		
Office Sought		District (if Senate or House	1 1	ited		
Danna Baroas	ble civil and criminal penalties. Purs		32A(7) and 68A	14 19 200		
SIGNATURE OF PERSON FIL	INGREPORT /	T <u>ule</u> phone	7	(PATE SIGNED	ı	
AM FILING A AUCA	eport date)	REPORT FOR (1) <u>ELECT</u> Indicate		LECTION YEAR,		
CHECK IF AMENDMENT T	O REPORT DATED		Local Comm	ittees, enter Date of Election	ì	
☐ Check if this is final (termina (You must continue to	ation) report and attach Netice of o file reports until a DR-3 is filed.)	Dieselution Form DR-3.	County & Lo which Election	cel Committees, enter Coun on is held	ty in	
STATEM	ênt of cash on hand					
committee. This amo	ning of the reporting period. (Total bunt MUST be the same as the ca beriod or must be zero if this is fire	sh on hand at the end	,\$	1002.32		
ADD TOTAL MONE	y taken in This Period					
Schedule A: Cash C	ontributions total (Attach Schedul	lė A) ("álso see in-kind below)		_ 0 -		
Schedule F: Loans F	Received total (Attach Schedule F	·)	**************	<i>O</i> -		
Schedule H: Total S	ales of Campaign Property (Attac	h Schedule H)		0-		
	l epplies to Candidates' Comm			• •		
		ŞUB-TOTA	L\$			
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD					
Schedule B: Expend	litures total (Attach Schedule B) (led ansol bns stdeb ees osla**	ow)	<u>*75.00</u>		
•	epayments total (Attach Schedule		•	0.00		
	f this reporting period (if final repo	•		927.32	_ `	
"UNPAID BILLS (From Scher	dule D - Attach Schedule D)		\$	0.00		
•	From Schedule E - Attach Sched			0.00		
•	om Schedule F - Attach Schedule	*		0.00		
CONSULTANT BREAKDOW		• • • • • • • • • • • • • • • • • • • •	V	YEB Y NO	****	
CANDIDATE COMMITTEES (,					
	PERTY (From Schedule H ~ Attac	h Schedule H)	s	,		
	alt a reconciled campaign account		•	•		

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	ione, See Back of F	117	Reset Form	SCHEE	OULE		
CONTRIBUT	TIONS MONEY TA ling candidate's personal fu	KEN IN		(Rev. 0		MONET	
COMMITTEE NAME (Must be same as on Statement of Organization)				CHECK THIS BOX IF			
Har	rison C	Republican Women				DING FC	
STATE CANDID	ATES NOTE: IF A CONTRI		ION COMMITTEEN :	IST TUE			
		BUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTI THE DRSIGNATED COLUMN. A LIST OF ID NUMBERS IS AV					
NOTE: ANY PER RESPONSIBILIT	RSON, OTHER THAN AN TES AND SHOULD IMME	I INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 IDIATELY CONTACT THE BOARD.	TO YOUR CAMP	AIGN M	AY HAVI	E FILING	
CAUTION: Sec	tion 689.324/6), amhlhi	the the use of telements and telements	amente for rollali	l==4.			
		- The state of the	america ići stilčit	ud ceut	upungana	OFTOTE	ny
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATION TO CANDI			DUNT	√ IF FOR
(MARADDI FR)	AND PAC CHECK NUMBER		(if applica		1420	2.723	RAISER
	ID#	50			\$		
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		TOTAL CÉ LOCA - à		_	\$		

[&]quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familiei relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS,	SEE BACK OF FORM
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAG COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LÉGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	· · · · · · · · · · · · · · · · · · ·
B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOY IS

AMENDING FORM

COMMITTE	isan Co. K	same as on Statement of Organization)	и	11 hands 499
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/27/09	CK#//83	Harrison Co. Javi Bd 2497 Milford ha Licopan IA 51546	Bental fee for fuir Booth	\$ 7500
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THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lows Code 68A-402(3)(i).)

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Page	 	xf	

TOTAL (if last page of this schedule)